## Foster Family Home - Corrective Action Report

Provider ID: 1-160080

Home Name: Liezl Casido, NA

Review ID: 1-160080-6

94-501 Kipou Street

Reviewer

Jackle Chamberlain

Waipahu

HI 96797

Begin Date:

9/17/2020

Foster Family Home Required Certificate

[11-800-6]

6.(d)(1)

Comply with all applicable requirements in this chapter, and

Comment:

6(d)(1) Home inspection made for a 2 bed CCFFH recertification. corrective action required due to CTA within 30 days

Foster Family Home

Client Rights

[11-800-53]

53.(b)(15)

Have daily visiting hours and provisions for privacy established;

Comment

53.b.15: Per My choice my way regulations, clients are allowed unlimited visitation. The Home policy states visiting hours 10 am - 4 pm

Foster Family Home

Records

[11-800-54]

54.(c)(5)

Medication schedule checklist;

Comment:

54.c.5 Medication discrepancy for client #1 - 1 medication stool softener is on medication administration record as twice per day, but has not been given since February 2020

medication administration record has not been signed since Sept 3 2020

Compliance Manager

Primary Care Giver

9 17 2020 Date

Date

09/17/2020

Date

9/17/2020

## **CTA RN Compliance Manager:**

## Reply to Terri Van Houten RN /Jackie Chamberlain RN

## Community Care Foster Family Home (CCFFH) Written Corrective Action Plan (CAP) Chapter 11-800

	Mana		$\triangle \triangle C C C U$	Cambidia and a.
P1.158	Name	on	LLEFF	Certificate:

LIEZL CASIDO

(PLEASE PRINT)

CCFFH Address:

94-501 KIPOU ST WAIPAHU, HI 96797

(PLEASE PRINT)

Rule Number	Corrective Action Taken How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
53.(b) (15)	Home policy for visiting hours and provisions changed to unlimited visitations.	09/17/20 20	Home will follow my choice my way regulations.
54.(c)(5)	Obtained order for medication from primary care provider from patient's last telehealth follow up appointment.	10/07/20	Home will make sure to always keep and obtain record of every doctors appointment for client either inperson or telehealth.

All items that were fixed are attached to this CAP	. محصاره احد
PCG's Signature:	Date: 10 8 7020

CTA has reviewed all corrected items